



राष्ट्रीय प्रौद्योगिकी संस्थान नागालैंड  
**NATIONAL INSTITUTE OF TECHNOLOGY NAGALAND**  
(An Institute of National Importance under Ministry of HRD, Govt of India)  
**Chumukedima, Dimapur**  
**Nagaland-797 103**

**FORM-18**

**FORM FOR REIMBURSEMENT OF TELEPHONE /MOBILE CHARGES**

Name : \_\_\_\_\_ Emp No. \_\_\_\_\_

Designation: \_\_\_\_\_ Department: \_\_\_\_\_

Telephone/Mobile Number: \_\_\_\_\_

S.No	Period	Date of Payment	Amount Paid	Amount Claimed (Rs.)
1.				
2.				
3.				
4.				
5.				
7.				
8.				
9.				

**DECLARATION:-**

I hereby declare that the above Telephone / Mobile is issued on my name and information as given above are true to the best of my knowledge. I also certify that above mentioned claim of month/(s) has/have not been claimed earlier.

Date:

(Signature)

**OFFICE USE**

(Accounts)

(Registrar)

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**Guidelines for telephone/mobile reimbursement**

1. Only single telephone/mobile connection as declared by the eligible staffs, shall only be reimbursed.
2. Only post-paid connection of telephone/mobile connection shall be eligible for reimbursement.
3. The telephone/mobile bills along with the statement of usage should be submitted in original for claiming reimbursement. The Accounts Office will pass bills for payment only against original/sub-vouchers/bills/invoices and not against photocopies/duplicate of the same.
4. The receipt of payment made by the Officers should be invariably attached, as this is an essential requirement of audit under rules.
5. In case of computer generated bill or Electronic Payment Confirmation receipt submitted for payment made, the same should be certified as True Copy (CTC) by the concerned Officer under own signature and stamp.
6. In case of making payment of cheque through Drop Box, the Officers should attach a photocopy of the original cheque with the bill submitted.